### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF GEORGIA ATLANTA DIVISION

IN RE:	)	
SUSAN DEBRA BURRIS,	)	CHAPTER 13
	)	
	)	<b>CASE NO. 16-65980JRS</b>
DEBTOR,	)	
	)	JUDGE SACCA

### AMENDMENT TO DEBTOR'S SCHEDULES I & J

Debtor hereby amends Schedules I & J, Summary of Schedules and Statistical Summary of Certain Liabilities, attached hereto, to provide accurate monthly income and expenses and to support the position that the Debtor's case is feasible and in compliance with 11 U.S.C. §1325 (a)(6).

This 5<sup>th</sup> day of January, 2021.

/s/Jeffrey B. Kelly JEFFREY B. KELLY Law Office of Jeffrey B. Kelly, P.C. Attorney for Debtor Georgia Bar No. 412798

107 E. 5<sup>th</sup> Avenue Rome, GA 30161 (678) 861-1127 (Phone) (706) 413-1365 (Fax) lawoffice@kellycanhelp.com

	in this information to	idantify your o									
	in this information to otor 1	Susan Debra									
	otor 2 ouse, if filing)	<u> </u>				_					
Uni	ted States Bankruptc	y Court for the:	NORTHERN DISTRIC	T OF GEORGIA							
Cas	se number 16-6	5980-jrs					Check if this	is:			
(If kr	nown)	,					■ An ame	nded	filina		
							☐ A supple	mer	nt showi	ing postpetition following date:	
0	fficial Form ′	<u> 1061</u>					MM / DE	)/ Y\	/YY		
S	chedule I: Y	our Inco	ome								12/15
spo atta	use. If you are separ ch a separate sheet tt 1: Describe Fill in your employ	rated and you to this form. ( Employment	are married and not filir r spouse is not filing wi On the top of any addition	th you, do not inclu	ıde inforn	nation	about your s	spot (if k	ise. If m nown).	nore space is Answer every	needed,
	information.									-filing spouse	
If you have more than one job, attach a separate page with information about additional employers.		Employment status  Occupation	☐ Employed  ■ Not employed			☐ Employed ☐ Not employed					
	Include part-time, s self-employed work		Employer's name								
	Occupation may incor homemaker, if it		Employer's address								
			How long employed th	nere?							
Par	rt 2: Give Deta	ils About Mon	thly Income								
	mate monthly incon use unless you are se		te you file this form. If y	/ou have nothing to ι	report for a	any line	e, write \$0 in	he s	pace. Ir	nclude your no	n-filing
	u or your non-filing รุ e space, attach a sep		re than one employer, co this form.	mbine the informatio	on for all e	mploye	rs for that pe	rson	on the	lines below. If	you need
						F	or Debtor 1			ebtor 2 or iling spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$	0.0	0	\$	N/A	-
3.	Estimate and list r	monthly overti	me pay.		3.	+\$	0.0	0_	+\$	N/A	<u>-</u>
4.	Calculate gross In	come. Add lin	e 2 + line 3.		4.	\$	0.00		\$_	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Susan Debra Burris	-	Ca	ase number (if known)	16-659	)80-jr	S	
	Cor	by line 4 here	4.	F	For Debtor 1		ebtor iling s	2 or pouse N/A	
_		-		,		*		14/74	_
5.		all payroll deductions:		•		Φ.			
	5a.	Tax, Medicare, and Social Security deductions	5a. 5b.			\$		N/A	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5c.			\$		N/A N/A	_
	5d.	Required repayments of retirement fund loans	5d.			\$		N/A N/A	_
	5e.	Insurance	5e.			\$		N/A	_
	5f.	Domestic support obligations	5f.	\$		\$		N/A	_
	5g.	Union dues	5g.	. \$		\$		N/A	_
	5h.	Other deductions. Specify:	5h.	+ \$	0.00	+ \$		N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		N/A	<u>.                                    </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		N/A	<u>-</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. \$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. \$		\$		N/A	<del>-</del>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	. \$	1,333.00	\$		N/A	_
	8e.	Social Security	8e.	. \$	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.			\$		N/A	<u>.                                    </u>
	8h.	Other monthly income. Specify:	8h.	+ \$	0.00	+ \$		N/A	<u>-</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,333.00	\$		N/A	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,333.00 + \$		N/A	= \$	1,333.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ <sub>—</sub>	1,333.00		13/6	-	1,555.00
11.	State Inches other Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depei				hedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12.	\$	1,333.00
13.	Do	you expect an increase or decrease within the year after you file this form	?					Combi month	ned ly income
		No.							

						i		
Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	Susan Debra	a Burris			Che	ck if this is:	
							An amended filing	
1	tor 2 ouse, if filing)							wing postpetition chapter the following date:
(Spt	ouse, ii iiiiig <i>)</i>						15 expenses as or	the following date.
Unit	ed States Bankı	ruptcy Court for the	: NORTH	HERN DISTRICT OF GEOR	RGIA		MM / DD / YYYY	
1	e number 10 nown)	6-65980-jrs						
Ot	fficial Fo	rm 106J				ı		
So	chedule	J: Your	Exper	ises				12/1:
info	ormation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Par 1.	t 1: Desci	ribe Your House nt case?	ehold					
	No. Go to	o line 2.	in a separ	ate household?				
	□N	lo		al Form 106J-2, <i>Expense</i> s	for Separate House	e <i>hold</i> of Deb	otor 2	
2			_	a				
2.	•	e dependents?	☐ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relate Debtor 1 or Debto		Dependent's age	Does dependent live with you?
				·				□ No
	Do not state dependents				Son		27	■ Yes
	асренаена	names.						■ res
								☐ Yes
								□ No
								□ Yes
								□ No
								☐ Yes
3.	expenses o	penses include of people other t d your depende	han ${}_{\sqsubset}$	No Yes				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. I	nclude first mortgag	e 4. \$	\$	0.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. S	\$	0.00
	4b. Prope	erty, homeowner's	s, or renter	's insurance		4b. \$	•	0.00
	4c. Home	maintenance, re	epair, and ı	ıpkeep expenses		4c. \$	\$	0.00
		owner's associat				4d. \$	·	33.00
5	Additional r	mortaaae navmi	ante for v	our residence, such as ho	me equity loans	5 5	\$	0.00

otor 1	Susan Debra Burris	Case num	ber (if known)	16-65980-jrs
Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	125.00
6b.	Water, sewer, garbage collection	6b.	\$	45.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	125.00
6d.	Other. Specify:	6d.	\$	0.00
Food	and housekeeping supplies	7.	\$	310.00
	Icare and children's education costs	8.		0.00
	ning, laundry, and dry cleaning	9.		50.00
	onal care products and services	10.		40.00
	cal and dental expenses	11.	·	40.00
	sportation. Include gas, maintenance, bus or train fare.			70.00
	ot include car payments.	12.	\$	75.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	itable contributions and religious donations	14.	\$	0.00
Insu	<u> </u>		· -	3.00
	of include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	250.00
15d.	Other insurance. Specify:	15d.	\$	0.00
Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			3.00
Spec	ify:	16.	\$	0.00
	Ilment or lease payments:			
	Car payments for Vehicle 1	17a.	·	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		•	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec		19.	_	
	r real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	•	0.00
Othe	r: Specify:	21.	+\$	0.00
Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	1,093.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		s ——	1,000.00
	13 ( 3 1			4 000 00
ZZC. /	Add line 22a and 22b. The result is your monthly expenses.		\$	1,093.00
Calc	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,333.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,093.00
				,
23c.	Subtract your monthly expenses from your monthly income.	00.5	œ.	240.00
	The result is your <i>monthly net income</i> .	23c.	\$	240.00
For ex modifi	ou expect an increase or decrease in your expenses within the year after your cample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?			ease or decrease because o
■ No				
□ Ye	es. Explain here:			
	<del>-</del>			

#### Case 16-65980-jrs Doc 64 Filed 01/05/21 Entered 01/05/21 16:07:50 Desc Main Document Page 6 of 9

Fill in this information to identify your case:								
Debtor 1	Susan Debra Bur	Susan Debra Burris						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA					
Case number (if known)	16-65980-jrs							

■ Check if this is an amended filing

# Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Par	Summarize Your Assets		
		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	158,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	51,225.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	209,225.00
Par	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	173,254.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	7,966.00
	Your total liabilities	\$	187,220.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,333.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,093.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Debtor 1 Susan Debra Burris Case number (if known) 16-65980-jrs

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_6,299.00

Ocopy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	6,000.00

# **AFFIDAVIT**

The undersigned hereby declares under penalty of perjury, that the statements made in the foregoing are true and correct to the best of his/her information, knowledge and belief.

This 5<sup>th</sup> day of January, 2021

#### **CERTIFICATE OF SERVICE**

This is to certify that I have this day served a copy of the foregoing Amendment to Schedules I & J on the following by U. S. Mail, in a properly stamped and addressed envelope.

Nancy J. Whaley Chapter 13 Trustee 303 Peachtree Center Ave Ste 120 Atlanta, GA 30303

Susan D. Burris 4921 October Way Acworth, GA 30102

This 5<sup>th</sup> day of January, 2021

/s/Jeffrey B. Kelly
Attorney for Debtor
Bar No. 412798
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